

Secretary of State Statement of Information

(California Stock, Agricultural Cooperative and Foreign Corporations)

IMPORTANT — Read instructions before completing this form.

SI-550

FILED

Secretary of State State of California

APR 2 3 2018

Fees (Filing plus Disclosure) – \$25.00;								
Copy Fees – First page \$1.00; each attachment page \$0.50; Certification Fee - \$5.00 plus copy fees				:	210125	-lor		
1. Corporation Name (Enter the exact name of the corporation as it is recorded with the California				26/25/PC				
Secretary of State. Note: If you registered in California using an assumed name, see instructions.) Rainberry Acquisition, Inc.				This Space For Office Use Only				
				2. 7-Digit Secretary of State File Number				
· 				C4123842				
3. Business Addresses				,				
a. Street Address of Principal Executive Office - Do not list a P.O. Box 818 Mission Street, Suite 210				City (no abbrev				
b. Mailing Address of Corporation, if different than item 3a				City (no abbrev	bbreviations) State Zip Code			
c. Street Address of Principal California Office, if any and if different than Item 3a - Do not list a P.O. Box				City (no abbrev	breviations) State Zip Code \ CA		154	
4. Officers	The Corporation is required Financial Officer may be add					ef Executive	Officer and	d Chief
a. Chief Executive Officer/	First Name	First Name Middle Name			st Name Suffix UN			Suffix
Address 818 Mission Street, Suite 210				City (no abbrev				
b. Secretary Justin	First Name Middle Name			Last Name Suffi				Suffix
Address 818 Mission Street, Suite 210				City (no abbreviations) San Francisco State Zip Code CA 94103			1	
c. Chief Financial Officer/ Justin	First Name Middle Name			Last Name Sun		<u> </u>	Suffix	
Address 818 Mission Street, Suite 210				City (no abbreviations) San Francisco San Francisco San Francisco State CA 94103				
5. Director(s)	California Stock and Agricul Corporation has additional di						st be listed	. If the
a. First Name Justin	Middle Name			Last Name Sun				' Suffix
Address 818 Mission Street, Suite 210				City (no abbrev	State CA	Zip Code 94103	!	
b. Number of Vacancies on the Board of Directors, if any							1 - 1 - 1	
,6. Service of Process (Must	provide either Individual OR Con	poration.)						
	ms 6a and 6b only. Must include	agent's full name and		address.	T			
California Agent's First Name (if agent is not a corporation)			Middle Name	Middle Name Last Name				Suffix
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box			City (no abbreviations)		.	State CA	Zip Code	
CORPORATION - Complete	tem 6c only. Only include the n	ame of the registered	agent Corporation	on.	···			
c. California Registered Corporate A	gent's Name (if agent is a corporati M	on) – Do not complete II	tem 6a or 6b	Colles	404		_	
7. Type of Business								
Describe the type of business or sen Holding Company	vices of the Corporation							
8. The Information contain	ed herein, including in any	attachments, is tru	ue and correc	t.				
April , 2018 Ju	stin (Yuchen) Sun			CEO	•	Yudie	i Sun	

Type or Print Name of Person Completing the Form

CEO Title

Signature